

STATEMENT OF ECONOMIC INTERESTS



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COVER PAGE  
FAIR POLITICAL  
PRACTICES COMMISSION

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Date Received

APR - 1 2013

CITY OF SANTA ROSA  
CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) Olivares (FIRST) Ernesto (MIDDLE)  
2013 APR - 8 12:00

1. Office, Agency, or Court

Agency Name

City of Santa Rosa

Division, Board, Department, District, if applicable

City Council

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☒ City of Santa Rosa

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: \_\_\_\_\_

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5.

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 03/29/13

(month, day, year)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
**Ernesto Olivares**

**▶ 1. BUSINESS ENTITY OR TRUST**

**Rita Olivares**

Name

**845 Fourth St. Suite A Santa Rosa, CA 95404**

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

**FAIR MARKET VALUE**

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

**NATURE OF INVESTMENT**

☐ Partnership    ☐ Sole Proprietorship    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

☐ None

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

**FAIR MARKET VALUE**

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

**IF APPLICABLE, LIST DATE:**

\_\_\_\_/\_\_\_\_/12    \_\_\_\_/\_\_\_\_/12  
ACQUIRED    DISPOSED

**NATURE OF INTEREST**

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <b>Ernesto Olivares</b>

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

**Jason Olivares**

ADDRESS (Business Address Acceptable)

**7592 Beverly Drive Rohnert Park, CA 94928**

BUSINESS ACTIVITY, IF ANY, OF SOURCE

**Tenant**

YOUR BUSINESS POSITION

**Property Owner/Leasor**

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%    ☐ None

SECURITY FOR LOAN

☐ None    ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

\_\_\_\_\_  
City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <b>Ernesto Olivares</b>
--

► NAME OF SOURCE (Not an Acronym)  
**James Salyers**

ADDRESS (Business Address Acceptable)  
**3417 Standish Ave. Santa Rosa CA 95407**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**President, North Bay Corporation**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 28 12	\$ 75.00	Dinner Ticket
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
**Janet Condron**

ADDRESS (Business Address Acceptable)  
**3548 Fieldcrest Ct. Santa Rosa, CA 95404**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Retired**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 15 12	\$ 100.00	Dinner Ticket
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
**Green Music Center**

ADDRESS (Business Address Acceptable)  
**1801 E. Cotati Ave. Rohnert Park, CA 94928**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Performing Arts Center**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 30 12	\$ 55.00	Event Ticket
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
**James Family Cellars**

ADDRESS (Business Address Acceptable)  
**6861 Grove St. Cotati, CA 94931**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Winery**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 29 12	\$ 100.00	Event Ticket
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)  
**Judy James**

ADDRESS (Business Address Acceptable)  
**951 Waterbird Way, Martinez CA 94553**

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
**Community Affairs Manager, Republic Services**

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 08 12	\$ 50.00	Event Ticket
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: \_\_\_\_\_